



1709

This Form Based on PTO/SB/21

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/717,902
	Filing Date	November 21, 2003
	First Named Inventor	AO et al.
	Group Art Unit	2812
	Examiner Name	Lindsay Jr., Walter Lee
	Attorney Docket Number	01-527-RCE

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input checked="" type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	PTO-Form 1449 (listing 2 US patent references, 4 non-US patent references and 2 Foreign Office Communications)
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	Copy of 4 non-US patent references and 2 Foreign Office Communications (English translation attached)
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request of Refund	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	David G. Posz Posz Law Group, PLC
Signature	
Date	June 17, 2008



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PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/8/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2008		Application Number	10/717,902
		Filing Date	November 21, 2003
		First Named Inventor	AO et al.
		Examiner Name	Lindsay Jr., Walter Lee
		Art Unit	2812
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Attorney Docket No.	01-527-RCE
TOTAL AMOUNT OF PAYMENT		(\$)	180

METHOD OF PAYMENT (check all that apply)

- ☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: **50-1147** Deposit Account Name: **Posz Law Group, PLC**
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charges fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	\$
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185
Total Claims	Extra Claims	Fee (\$)
- 20 or HP = 0	x	\$50
HP = highest number of total claims paid for, if greater than 20	=	\$0
Indep. Claims	Extra Claims	Fee (\$)
- 3 or HP = 0	x	\$210
HP = highest number of independent claims paid for, if greater than 3	=	\$0

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 = 0	/ 50 =	(round up to a whole number) x	=	\$0

4. OTHER FEE(S)

Non-English Specification,	\$130 fee (no small entity discount)	
Other: Information Disclosure Statement Fee		\$180

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	37,701	Telephone	(703) 707-9110
Name (Print/Type)	DAVID G. POSZ	Date	June 17, 2008		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



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FEE TRANSMITTAL For FY 2008

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Total Sheets - 100 = 0 / 50 = _____ (round up to a whole number) x Fee (\$) = Fee Paid (\$)

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Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement Fee

\$180

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) <u>37,701</u>	Telephone <u>(703) 707-9110</u>
Name (Print/Type)	<u>DAVID G. POSZ</u>	Date	<u>June 17, 2008</u>

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Applicant(s): AO et al.	Atty. Dkt.: 01-527-RCE
Serial No.: 10/717,902	Group Art Unit: 2812
Filed: November 21, 2003	Examiner: LINDSAY JR, Walter Lee
Title: MAGNETIC IMPEDANCE DEVICE, SENSOR APPARATUS USING THE SAME AND METHOD FOR MANUFACTURING THE SAME	Allowed: April 7, 2008 Confirmation No.: 7361
Commissioner for Patents Alexandria, VA 22313-1450	Date: June 17, 2008

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

Pursuant to 37 C.F.R. §1.56, the references listed on the attached Form PTO-1449 are being brought to the attention of the Examiner without any admission that they constitute statutory prior art, or without any admission that they contain subject matter that anticipates the invention or renders the invention obvious to a person of ordinary skill in the art.

Further, pursuant to 37 C.F.R. §1.97(e), the undersigned hereby certifies that each listed reference was first cited in a communication (copy and English translation enclosed) from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this statement.

The above-identified patent application has been allowed as indicated in the NOTICE OF ALLOWABILITY mailed on April 7, 2008. Therefore, pursuant to 37 C.F.R. 1.97(d), the references are being submitted along with the appropriate fee. Please charge any additional fees to Deposit Account No. 50-1147.

Also, the Examiner is requested to initial the attached PTO Form-1449 and to return a copy of same to the undersigned attorney as proof that the listed references have been considered and made of record.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "David G. Posz".

David G. Posz
Reg. No. 37,701

Posz Law Group, PLC
12040 South Lakes Drive, Suite 101
Reston, VA 20191
(703) 707-9110 (phone)
Customer No. 23400

06/18/2008 AWDHDAF1 00000030 10717902
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